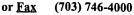
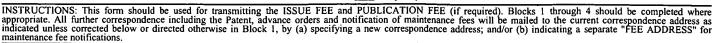
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450





CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

03/15/2004

Ivan S Kavrukov Cooper & Dunham 1185 Avenue of the Americas New York, NY 10036



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Paul Teng, Reg. No. 40,837	(Depositor's name)
tank Tena	(Signature)
April 26, 2004	(Date)

				\sim		
Į	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		TORNEY DOCKET NO.	CONFIRMATION NO.
	09/554,155	08/22/2000	Shigeru Kakugawa		1141/61930	7636

TITLE OF INVENTION: MAGNET APPARATUS AND MRI APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330		\$0	\$1330	06/15/2004	
EXAM	MINER	ART UNI	Т .	CLASS-SUBCLASS			
BARRERA	, RAMON M	2832		335-296000	_		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence)			names of agents OI	nting on the patent front page, up to 3 registered patent a R, alternatively, (2) the name ing as a member a registered	of a single	& Dunham LLP	
Address form PTO/SB/I "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required.	22) attached. ion (or "Fee Address" Indicati or more recent) attached. Use	on form of a Customer	agent) and	d the names of up to 2 regist or agents. If no name is liste	tered patent		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hitachi Medical Corporation Hitachi, Ltd.

Tokyo, Japan Tokyo, Japan

Please check the appropriate assignee category or catego	ries (will not be printed on the patent);	🗅 individual	corporation or other private group entity	☐ governmen			
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):						
X Issue Fee	A check in the amo	unt of the fee(s)	is enclosed.				
☐ Publication Fee	Payment by credit of	ard. Form PTO	-2038 is attached.				
XD Advance Order - # of Copies4	The Director is he Deposit Account Num	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 03-3125 (enclose an extra copy of this form).					
D:			W				

	p	Deposit Account Numb	ber <u>03-3125</u> (er	iclose an extra copy of this form).
Director for Patents is requeste	d to apply the Issue Fee and Publication	on Fee (if any) or to re-apply a	any previously paid issue fee to the	application identified above.
other than the applicant; a i	Paul Teng (Date Reg. No. 40,837 Publication Fee (if required) will not registered attorney or agent; or the ds of the United States Patent and Tra	April 26, Zoolf to be accepted from anyone assignee or other party in	'	
obtain or retain a benefit by application. Confidentiality is	n is required by 37 CFR 1.311. The the public which is to file (and by governed by 35 U.S.C. 122 and 37 C to complete, including gathering, pre	the USPTO to process) an CFR 1.14. This collection is	04/29/2004 GWORDOF2 01 FC:1501	00000153 09554155 1330.00 0p

completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

01 FC:8001 12.00 DA

04/29/2004 GWORDOF2 00000154 033125

09554155

TRANSMIT THIS FORM WITH FEE(S)